

# FORM 2 NOTIFICATION OF DANGEROUS WASTE ACTIVITIES

FEB 16 1999

Washington State Department of Ecology  
Attn: DW Notifications  
P.O. Box 47658  
Olympia, WA 98504-7658  
(360) 407-6737

Note: Failure to properly and completely fill out your form may delay processing and/or cause your form to be returned for completion. Associated page numbers with detailed instructions are listed for each section.

1. **Notification.** Please select one of the following choices. (p. 5)

1.a. ☐ New notification **OR**

If 1.a., complete entire form.

DEPARTMENTAL USE ONLY									
WA									

1.b. ☐ Existing RCRA Site ID# WA D988513495

If 1.b., choose desired action below and fill in effective date.

☐ Revise Notification (complete entire form)

☐ Reactivate Site ID# (complete entire form)

☒ Withdraw Site ID # (skip sections 11 and 12)

☐ Cancel Site ID# (skip sections 11 and 12)

Effective date: 02/12/99 97  
mm dd yy

2.a. **SIC Code:** (p. 7) 0919 (Primary) 4493

2.b. Type of business conducted at this site: (p. 7) marine sales/service.

3. **Name of site** (p. 7) BIRKHEAD & AGEE MARINE SER. INC

4. **Location of site** (p. 7)

Street 2100 W. Commodore Way

City or Town SEATTLE

County KING

State WA Zip 98199

5. **Site mailing address** (p. 7)

Street or P.O. Box Same as Above.

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

6. **Site contact** (person Ecology should contact for clarification on this form, p. 7)

Name (b) (6)

Job Title owner.

Phone Number (b) (6)

Mailing Address 2100 W. Commodore Way

City SEATTLE

State WA

Zip 98199

NOTIFICATION OF DANGEROUS WASTE ACTIVITIES

RCRA Site ID# (p. 5) WA D988513495

Name of site (same as section 3, p. 7) BIRCHARD & ABEL MARINE SERVICES

7. Department of Revenue # (p. 8): 600-555-770

8. Site operator (person responsible for dangerous waste activity, p. 8)

Name (b) (6) Phone Number (b) (6)

Mailing Address 2100 W. Commodore Way

City SEATTLE State WA Zip 98198

9.a. Site ownership (legal owner of business, p. 8)

Has ownership changed since you last notified or reported? ☒ Yes ☐ No

If Yes, effective date of ownership change: 05/01/98  
mm dd yy

Name STEVEN MC EWEY Phone Number 425-

Mailing Address 19029 4th AVE W.

City LYNNWOOD State WA Zip 98036

9.b. Site ownership type (p. 8)

Please circle the appropriate letter at right which best describes the legal status of the current owner of the business.

F = Federal S = State  
I = Tribal Trust P = Private  
C = County M = Municipal  
D = District O = Other

10.a. Property ownership (legal owner of this property, p. 8)

Name (b) (6) Phone Number (b) (6)

Mailing Address 2100 W. Commodore Way

City SEATTLE State WA Zip 98198

10.b. Property type (p. 8)

Please circle the appropriate letter at right which best describes the legal status of the land on which the business is located.

F = Federal S = State  
I = Tribal Trust P = Private  
C = County M = Municipal  
D = District O = Other



# NOTIFICATION OF DANGEROUS WASTE ACTIVITIES

RCRA Site ID# (p. 5) WAD 988513495

Name of site (same as section 3, p. 7) BIRCHMOUNT & AGES MINING SITE, INC.

## 11. Type of regulated waste activity (Mark "X" in the appropriate boxes, p. 9)

### 11.a. Dangerous waste activity

#### 1. Generator

- ☐ a. Greater than 1000 kg/mo (2,200 lbs.)  
☐ b. 100 to 1000 kg/mo (220–2,200 lbs.)  
☐ c. Less than 100 kg/mo (220 lbs.)

#### 2. Frequency

- ☐ a. Monthly  
☐ b. Batch  
☐ c. One-time only

#### 3. Transporter (indicate mode in boxes 1–5 below).

- ☐ a. Transport own waste  
☐ b. Transport for commercial purposes

#### Mode of Transportation

- ☐ 1. Air  
☐ 2. Rail  
☐ 3. Highway  
☐ 4. Water  
☐ 5. Other—specify: \_\_\_\_\_

#### 4. Treater, Storer, Disposer (at installation). Note: A RCRA Permit is required for this activity.

- ☐ a. For waste generated at this facility  
☐ b. For waste generated by other facilities

#### 4. (Continued)

Which of the following RCRA permitted activities occur at this facility?

- ☐ 1. Treatment  
☐ 2. Disposal  
☐ 3. Storage

#### 5. Dangerous waste fuel

- ☐ a. Generator marketing to burner  
☐ b. Other marketers  
☐ c. Boiler and/or industrial furnace  
☐ 1. Smelter deferral  
☐ 2. Small quantity exemption

Indicate type of combustion device(s):

- ☐ 1. Utility boiler  
☐ 2. Industrial boiler  
☐ 3. Industrial furnace

#### ☐ 6. Underground injection control

#### ☐ 7. Immediate recycler

#### ☐ 8. Permit-by-rule facility

#### ☐ 9. Treatment by generator

### 11.b. Used oil fuel activities

#### 1. Used oil fuel marketer

- ☐ a. Marketer directs shipment of used oil to off-specification burner  
☐ b. Marketer who first claims the used oil meets the specifications

#### 2. Used oil burner—indicate type(s) of combustion device(s).

- ☐ a. Utility boiler  
☐ b. Industrial boiler  
☐ c. Industrial furnace

#### 3. Used oil transporter—indicate type(s) of activity(ies).

- ☐ a. Transporter  
☐ b. Transfer facility

#### 4. Used oil processor/re-refiner—indicate type(s) of activity(ies).

- ☐ a. Process  
☐ b. Re-refine

## 12.a. Waste descriptions (p. 12)

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# NOTIFICATION OF DANGEROUS WASTE ACTIVITIES

RCRA Site ID# (p. 5) WA \_\_\_\_\_

Name of site (same as section 3, p. 7) \_\_\_\_\_

## 12.b. Waste Codes: (p.12)

1. **Characteristics** (WAC 173-303-090): Identify (circle or fill in) those codes that best describe your waste(s).

D001 Ignitable	D002 Corrosive	D003 Reactive	TCLP _____
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2. **Listed** (WAC 173-303-9903): Fill in those codes that best describe your waste(s).

\_\_\_\_\_

3. **State-only** (WAC 173-303-100, -180, and 9904): Circle those codes that best describe your waste(s).

WT01 WT02 Toxic	WP01 WP02 WP03 Persistent	WL01 WL02 Labpack	W001 PCB	WSC2 Solid Corrosive	
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## 13. Comments (p. 13)

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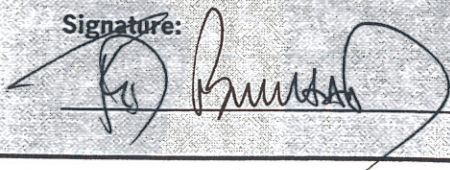
## 14. Notification checklist (p. 13)

- ☒ Did you **sign** and **date** notification form?
- ☒ Did you keep a copy for your files?
- ☒ Did you **complete the correct sections** of this notification form to fit your situation? (See section 1—Notification).
- ☒ If you are canceling or withdrawing your RCRA Site ID number, you are responsible for annual reports up to the date your regulated dangerous waste activities ended. Did you **submit your completed annual report** with this request for cancellation or withdraw?

## 15. Certification (p. 13) **This form cannot be processed without a signature**

*I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.*

Signature:



Name and official title (type or print):

TED BIRCHARD PRES.

Date signed:

2-12-89

U.S. ENVIRONMENTAL PROTECTION AGENCY

ACKNOWLEDGEMENT OF NOTIFICATION  
OF HAZARDOUS WASTE ACTIVITY  
(VERIFICATION)

THIS IS TO ACKNOWLEDGE THAT YOU HAVE FILED A NOTIFICATION OF HAZARDOUS WASTE ACTIVITY FOR THE INSTALLATION LOCATED AT THE ADDRESS SHOWN BELOW TO COMPLY WITH SECTION 3010 OF THE RESOURCE CONSERVATION AND RECOVERY ACT (RCRA). YOUR EPA IDENTIFICATION NUMBER MUST BE INCLUDED ON ALL SHIPPING MANIFESTS FOR TRANSPORTING HAZARDOUS WASTES; ON ALL ANNUAL REPORTS THAT GENERATORS OF HAZARDOUS WASTE, AND OWNERS AND OPERATORS OF HAZARDOUS WASTE TREATMENT, STORAGE AND DISPOSAL FACILITIES MUST FILE WITH THE EPA; ON ALL APPLICATIONS FOR A FEDERAL HAZARDOUS WASTE PERMIT; AND ON ALL OTHER HAZARDOUS WASTE MANAGEMENT REPORTS AND DOCUMENTS REQUIRED UNDER SUBTITLE C OF RCRA.

EPA I.D. NUMBER ==> WAD988513495

MAILING ADDRESS ==> BIRCHARD & AGEE MARINE  
2100 W COMMODORE WAY  
SEATTLE WA 98199

INSTALLATION ADDRESS ==> 2100 W COMMODORE WAY  
SEATTLE WA 98199

11/18/92



